



Original Communication

Domestic violence on pregnant women in Turkey

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ABSTRACT

Objective: Domestic violence is accepted worldwide as an important health problem. Besides diagnosis and treatment process, there are difficulties when considering of medico-legal evaluation of pregnant women subjected to domestic violence.

As a signatory of the “Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)” Turkey has certain commitments regarding domestic violence and made regulations on national law. The purpose of the present study is to demonstrate the prevalence of domestic violence during pregnancy among the women who applied to obstetrics clinics and evaluating of the participants’ knowledge level about the legal legislation concerning domestic violence.

Findings: Pregnant women attending for antenatal care to department of Gynecology and Obstetrics were interviewed using an anonymous and confidential questionnaire. The questionnaire used was a version of Abuse Assessment Screen with guidance of references. 28 (13.4%) women stated that they had been subjected to violence before pregnancy. Only 10 (4.67%) women had stated experience of violence during pregnancy. 148 (69.2%) of them had stated that they had no knowledge about any legislation concerning domestic violence in our country. **Conclusion:** We believe that society awareness should be increased and the health workers should be informed about their ethical and legal responsibilities concerning domestic violence during pregnancy. The knowledge and sensitivity of health care personnel in Prenatal Clinics and Family Planning Services should be increased and examination protocols should be provided about domestic violence against pregnant women.

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1. Introduction and background

Domestic violence against women has been accepted as a prior health problem.^{1–4} International health institutions mention that physicians and health workers are generally unaware of this problem and do not care these patients.^{1,5–7} World Health Organization has certain recommendations on physicians’ practices regarding violence against women.¹ These are; informing physicians to self-question their prejudices, to diagnose and rehabilitate violence victims and encouraging them to develop domestic violence protocols.¹

Domestic violence during pregnancy is also an important health problem.^{8–10} Studies indicate that domestic violence against pregnant women varies between 4–40%.^{11–14} The effects of domestic violence represent complications that may place the health of the fetus at risk. It was reported that domestic violence has been associated with risk of miscarriages, premature birth, low birth weight,

defect of antenatal care, early separation of placenta, rupture of membranes, fetal injury.^{15–18}

As a signatory of the “Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)” and “Convention on the Rights of the Child”, Turkey has certain commitments regarding domestic violence and child abuse.^{19,20} Enforced since 1998, the Law no. 4320 on the Legal Protection of the Family is a step taken to fulfill these commitments.²¹ The law requires that domestic violence perpetrators be taken away from their homes and prevented from approaching their homes and disturbing their family members through means of communication for maximum 6 months. The perpetrators are warned that they can be arrested and even imprisoned in some instances if they do not comply with the verdict of the court.²¹ In May 2004, Article 10 of the Turkish Constitution was revised to state gender equality and the State’s commitment in gender equality implementation. In the New Turkish Penal Code, domestic violence is considered among crimes punished more severely.^{20,21}

Despite these regulations, limited number of studies attempting to evaluate the knowledge level of the society and health workers

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about the laws concerning domestic violence in Turkey.^{20,22,23} There have been only few studies from Turkey on domestic violence during pregnancy and near all of them have been performed in first step health care centers.^{24–26} Therefore, we aimed to determine the prevalence of domestic violence during pregnancy among the women presenting to our obstetrics clinics and to evaluate how much the participants know about the Turkish legal legislation concerning domestic violence.

2. Methods

Following the planning of the study and preparation of the questionnaire questions, the approval of the Ethics Committee of Clinical and Laboratory Research of Dokuz Eylül University Medical School was obtained. (30.03.2004 and 05/05/04 no).

In the present study, a questionnaire was implemented to pregnant women who applied to antenatal clinics of Dokuz Eylül University Medical Faculty Gynecology and Obstetrics Department.

The questionnaire used was a version of Abuse Assessment Screen with guidance of references.^{4,7,12,13,18} At the top of the questionnaire form, information about domestic violence during pregnancy was given. The questionnaire itself consisted of two parts. The first part requested demographic data. The second part consisted of eight questions (Table 1). The first seven questions aimed to reveal whether the participants were subjected to any form of domestic violence. The final question of the second part tested the participants' knowledge level about the Turkish legal legislation concerning domestic violence.

An anonymous and confidential questionnaire was given to women after informing them verbally. Written consent was not obtained because all participants were adults and return of the survey was considered implied consent. Questionnaire was performed in clinic private examination room and a closed reply box was used. A cover letter accompanying the study explained the voluntary and anonymous nature of the study. The reply box was emptied at the end of the day. Also, the women had the opportunity to respond to this questionnaire in privacy without presence of partner/husband.

Between 1st April 2004 and 1st April 2005, a self-administered questionnaire was offered by clinic doctors to all pregnant women age 18 years old or older. Questionnaires were applied to 214 pregnant women at this time. Data were entered into a computerized database using Windows SPSS 11.0 and for statistical analysis; Paired Samples T Test and McNemar test were used.

3. Results

The median age of women who returned questionnaires was 27.34 ± 5 , 09 (youngest 18, oldest 45 years old). Table 2 summarizes education status and the number of children of pregnant women. There was no statistical significance relationship between participants' number of child and education status.

Nearly all of the participants (99%) were married. Of the 214 participants, 112 (52.3%) were house wives, 17 (7.9%) were teachers, 13 were (6.1%) health care workers and others were working at different occupational areas. 13.7% of them smoke and 2.7% of them use alcohol daily.

12.6% of partners of pregnant women were graduated from preliminary school, 47.1% of them were graduated from high school and 40.3% of them had a bachelor's degree. 37.9% of partners were policemen and military officers, 14.5% were public servants, 5.6% were teachers, and 5.1% were health workers and others. 51.9% of partners of pregnant women smoke and 24.5% of them use alcohol.

The participants were asked whether they had a history of violence from their partners or someone from a close family member and 28 (13.4%) participants stated that they had been subjected to violence before pregnancy. Only 10 (4.67%) women had stated experience of violence during pregnancy. Of the 214 participants, 46 (21.5%) identified the nature of the violence. Table 3 summarizes the responses of women to questions about domestic violence.

35 (16.35%) women stated the way they respond after being subjected to violence. Twenty five of them stated that they could not do anything. The reactions of women exposed to violence are represented in Table 4.

9 (4.3%) of the participants suffered from economical violence and 7 (3.4%) of them suffered from sexual violence. The participants were asked whether they were afraid of someone in

Table 2
Participants' child number according to education status

Education status	Number of child			Total
	0	1	2 and upper	
Preliminary school	30 (40, 5%)	34 (45, 9%)	10 (14, 7%)	74 (100%)
High school	49 (49, 5%)	43 (43.4%)	7 (7, 1%)	99 (100%)
University	27 (41, 7%)	14 (34.1%)	–	41 (100%)
Total	106 (49, 5%)	91 (42, 5%)	17 (7, 9%)	214 (100%)

Table 1
The questions of the questionnaire*

(a) Have you ever been emotionally or physically abused by your husband or someone important to you? Please notice who was the perpetrator?	Husband, ex-husband, boy friend, one from family, other
(b) Have you been exposed to violence from your husband or anyone from your family during your pregnancy? Please notice who was the perpetrator?	Husband, ex-husband, boy friend, one from family, other
(c) What type of violence perpetrated?	
a. Shouting, insulting	
b. Slapping, pushing (without injury)	
c. Punching, kicking resulted bruises, abrasions	
d. Severe injuries resulted to broken bones, burns, etc.	
e. All of them	
f. Other (define..)	
(d) What did you do when you were exposed to violence?	
Nothing, applied to a health institution, applied to official departments (police...)	
Other (specify...)	
(e) Have you ever met to financial abuse during pregnancy? Please notice who was the perpetrator?	Husband, ex-husband, boy friend, one from family, other
(f) Has anyone forced you to have sexual activities without your consent during pregnancy? How many times? Who?	Husband, ex-husband, boy friend, one from family, other
(g) Are you hesitate or afraid of anyone in your family? Please notice who was the perpetrator?	Husband, ex-husband, boy friend, one from family, other
(h) Do you know any legislation related to domestic violence in our country? If yes please define...	

* Brief explanation part and demographic data section is removed. Prepared by the help of Abuse Assessment Screen*.^{8,9}

Table 3

Response of pregnant women suffered from violence

	Subjected to violence before pregnancy	Subjected to violence during pregnancy	Violence perpetrator	Kind of abuse	Reaction to violence
1	No	NO	Husband	Verbal	Response
2	Yes	NO	Husband	Verbal + sexual	No reaction
3	No	Yes	–	Verbal + financial	No reaction
4	No	No	Other	Other	Other
5	Yes	No	Boy friend	–	–
6	Yes	Yes	Husband	Verbal	No reaction
7	No	No	–	All	–
8	Yes	Yes	Father	Physical	No reaction
9	Yes	Yes	–	Verbal	No reaction
10	Yes	Yes	Husband (divorced)	Economical + sexual + fear + all of them	No reaction
11	Yes	–	Husband	–	No reaction
12	No	No	–	All	Apply to legal office
13	No	No	–	Financial	–
14	No	No	–	Verbal	No reaction
15	Yes	No	Mother in law	Verbal	Other
16	No	No	–	Verbal	No reaction
17	Yes	No	Husband	Verbal + sexual	No reaction
18	Yes	No	Father in law	All types	No reaction
19	No	Yes	Husband	Verbal	Response
20	Yes	No	Someone from family	Verbal	No reaction
21	No	Yes	–	Verbal + fear	No reaction
22	Yes	No	Husband	Physical + sexual	No reaction
23	No	No	–	Financial	–
24	No	No	–	Fear	–
25	Yes	No	Husband	Physical	No reaction
26	No	No	Someone from family	Fear	–
27	Yes	No	–	Physical	No reaction
28	Yes	No	Father	All	No reaction
29	Yes	No	–	Verbal	No reaction
30	Yes	No	Someone from family	Verbal	No reaction
31	Yes	No	Someone from family	Verbal	No reaction
32	Yes	Yes	Husband (divorced)	All	Other
33	No	No	–	Verbal	–
34	Yes	No	Boss	Verbal	–
35	Yes	Yes	Husband	Verbal	No reaction
36	–	No	–	Other + fear	Other
37	–	No	–	Other + financial	–
38	No	No	–	Verbal	Response
39	Yes	No	Husband	Physical + fear + financial	No reaction
40	Yes	No	Someone from family	–	–
41	–	No	–	Other	Other
42	Yes	Yes	Husband	Physical	No reaction
43	Yes	No	Husband	Sexual + financial	–
44	Yes	No	Boy friend	Verbal + sexual + fear	Response
45	No	No	–	Financial	–
46	No	No	–	Verbal	No reaction
47	No	No	Husband	Fear	–
48	No	No	–	Sexual	No reaction
49	No	No	–	Verbal	–
50	Yes	No	Someone from family	–	–
51	Yes	No	Husband	–	–
51/214	28 (% 13.4)	10 (% 4.67)	30 (% 14.01)	46 (% 21.49)	35 (% 16.35)

their families, 8 (3.8%) of the pregnant women stated that they were.

The participants were asked whether there were any legal arrangements pertaining to domestic violence in our country, 148 of the participants (69.2%) stated that they had no knowledge about the subject. Although 66 pregnant women stated that they were informed about some of the legislations regarding domestic violence, only 14 of them had stated correct answers in accordance with the content of the legislations.

Women subjected to domestic violence before pregnancy were found to be statistically more inclined to drink alcohol ($\chi^2 = 9.992$, $p = 0.002$).

There did appear to be a statistically significant relationship between domestic violence and educational status of violence perpetrators. The rate of domestic violence was noted highly among partners of women who graduated from university compared to

partners who were primary school graduates ($\chi^2 = 12.585$, $p < 0.000$).

4. Discussion

The prevalence of serious violence against pregnant women was found 4.3% in a study using Severity of Violence against Women Scale (SVAW) in Sweden.¹⁷ Using a modified version of Abuse Assessment Screen (AAS), one study from England showed the prevalence of violence against pregnant women to be 17%.¹³ Other studies using Abuse Assessment Screen have indicated that 39.5% of pregnant women suffer from abuse.⁸ The results of a study performed in a first step health clinic in Turkey showed that 24.9% of 101 pregnant women suffered from domestic violence.²⁷ In another research on 154 pregnant women in a first step health clinic indicated that the prevalence of domestic violence was 71.4%.²⁵

Table 4

The reactions of pregnant women after exposure to violence

Reactions to violence	Numbers
Did nothing (no reaction)	25
Shout, cry out	4
Cried, He apologized, Gone to father's house, Did not disclose, (Others)	5
Reported to legal offices	1
Total	35

In this study, 214 pregnant women were asked questions about the type of violence, perpetrators and victims' reactions to the violence they experienced. Out of 214 pregnant women, 51 admitted that they suffered from some kind of violence. They refrained from expressing the violence they were exposed to although they were assured that their identities would not be revealed and their partners did not accompany them during data collection. This might be due to the proximity of the outpatient clinic to the waiting hall where the partners of pregnant women were waiting for them, lack of items about domestic violence in the prenatal follow up forms and lack of guidelines about domestic violence against pregnant women in Gynecology and Obstetrics Clinics. Domestic studies have shown that pregnant women have more difficulties in expressing domestic violence in university hospitals than in the first line health care institutions, consistent with the results of the present study.^{12,13,25,27,28}

Some studies have shown that pregnancy constitutes a great risk of domestic violence, though others revealed exactly the opposite.^{10,12,25,29} One study from Turkey showed that 69.7% of the women who suffered from physical violence before pregnancy were not subjected to domestic violence during pregnancy.²⁷ Similarly, the results of this study showed that out of 27 women who suffered from violence before pregnancy, 20 (74.1%) noted that they did not face with domestic violence during pregnancy. Only three women noted that they suffered from violence during pregnancy although not exposed to violence before pregnancy. It is pointed out that signs of violence can easily be disclosed because pregnant women often see the clinicians for physical examinations.¹⁰ We believe that further studies are required to determine the frequency of domestic violence during pregnancy.^{25,27,29}

Perpetrators of violence to pregnant women are often husbands or boyfriends (partners). One study revealed that 11% of the pregnant women were exposed to physical violence and that 46% of the perpetrators were husbands or partners.¹³ Another study showed 30% and 33% of the perpetrators to be husbands/ex-husbands and boyfriends respectively. In this study 28 women identified the perpetrator and 13 perpetrators were husbands (46%), 2 were ex-husbands and 2 were boyfriends, comparable with the literature.^{10,13}

People who suffer from domestic violence refrain from reacting against this violence. For this reason, the rate of domestic violence victims presenting to health institutions and complaining to the police is very low.^{1,30} In this study, only 35 people answered the question about what they did when they were subjected to violence and 25 (73.5%) of them stated that they did nothing, consistent with the literature. It was striking that only one victim applied to the legal authorities. Actually, she said "no" to all questions whether she faced with domestic violence, but she replied the question about the type of violence by ticking the choice: "all kinds". Some studies have shown that domestic violence victims reported to the police stations and Forensic Medicine Councils withdrew their complaints for different reasons and thought that government institutions/courts did not have enough precautions to prevent domestic violence.³¹

In this study, 30.8% of pregnant women were aware of the legal act pertaining to domestic violence. However, only 14 people (6.

54%) stated that they were informed about the content of the law. It is exclusively thought-provoking that people are not informed about the law (no: 4320) on the Protection of the Family enforced since 1998, which obligates the violence perpetrators to be taken away from their homes and may require imprisonment in some instances. Several other studies have also emphasized that the citizens were not sufficiently informed about the developments in the field of law concerning domestic violence.^{19–21,23}

There have been many studies about the violence against women and the physician's responsibility about this issue.^{24–27} In these studies, it was remarkable that women who suffered from domestic violence did not express their complaints and it was necessary to make protocols to help physicians determine and define domestic violence.^{8,24–27} One study revealed that physicians were able to make the diagnosis of domestic violence in less than 10% of women exposed to domestic violence.⁸

Medico-legal evaluation of pregnant women subjected to domestic violence necessitates a professional approach. In fact, it is necessary to report and document medico-legal cases, to ensure the safety of medical records and to disclose the relation between traumas and lesions. However, it may be difficult to find strong medical evidence especially at the beginning of pregnancy. Besides obeying the treatment protocols, an acceptable medico-legal approach must be adopted. This approach could prevent domestic violence and protect patient rights and it is also important for legal responsibility of physicians.^{32–37}

5. Conclusion

This study showed that pregnant women may not express the domestic violence they are exposed to and may not know about the regulations for domestic violence – some may even pretend to know the relevant regulations. Therefore, gynecologists should be alert with the signs of domestic violence. In fact, they should keep domestic violence in mind during routine prenatal care and record all data about domestic violence they encounter. However, gynecologists alone may not cope with the issue.

It can be suggested that domestic violence should be incorporated into curricula of medical schools so that physicians can diagnose it and that other health care professionals should be offered training for medical, ethical and legal aspects of domestic violence as well. Social awareness and knowledge about protective and supportive legislations on the issue should also be improved.

In conclusion, the knowledge and sensitivity of health care staff in Prenatal Clinics and Family Planning Services should be increased and examination protocols should be provided about domestic violence against pregnant women. This could be the first step about the recognition of this phenomenon and protection of maternal and newborn health. All parts of the society such as mass communication media, health care institutions, educational institutions, the police and nongovernmental organizations should be informed about legal arrangements via the projects, campaigns and courses.

Conflict of interest statement

The authors of this manuscript state that there are no conflicts of interest.

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